## Congress of the United States Washington, DC 20515

October 6, 2017

Acting Secretary Donald Wright U.S. Department of Health & Human Services 200 Independence Avenue, S.W. Washington, D.C. 20201

Dear Acting Secretary Wright:

On July 13, 2017, the Centers for Medicare and Medicaid Services released the proposed rule for "Hospital Outpatient Prospective Payment System and Ambulatory Surgical Center Payment System Changes for 2018." While we were pleased CMS included a two-year moratorium on enforcement of its burdensome direct supervision requirement for outpatient therapeutic services provided in certain small and rural hospitals, we urge you to include a moratorium for the current year, 2017, and to permanently extend the enforcement moratorium.

Under current regulations, hospitals must perform most outpatient therapeutic services under the "direct supervision" of a physician or qualified non-physician practitioner, which can be challenging for small and rural hospitals due to already low numbers of available health professionals and associated costs. When these services become too expensive or difficult to provide under "direct supervision" requirements, they are at risk of being terminated, leaving patients without access to care in their communities.

The American Hospital Association, which represents nearly 2,000 small and rural hospitals, has stated that hospital outpatient services in rural communities have always been – and will continue to be provided by licensed, skilled professionals under the overall direction of a physician. However, if CMS enforces its burdensome direct supervision policy in these vulnerable facilities, we are concerned that many hospitals will simply stop offering certain services or drastically limit when they are offered to patients because they cannot afford to maintain compliance with the regulation. Furthermore, we are concerned that without a moratorium in 2017, hospitals operations and services may be jeopardized by the prospect of enforcement of this burdensome regulation.

We appreciate your willingness to listen to and consider our concerns, and for your commitment to protect access to patient care in rural communities and provide regulatory relief to America's small and rural hospitals.

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CC: Seema Verma, Administrator, Centers for Medicare and Medicaid Services